

FEE TRANSMITTAL for FY 2007

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 930)

Complete if Known

Application Number	10/699,035
Filing Date	10/31/2003
First Named Inventor	Bateman
Examiner Name	Haddad
Art Unit	1644
Attorney Docket No.	071838.0142

METHOD OF PAYMENT (check all that apply)

Check Credit card Money Order Other None

Deposit Account:

Deposit Account Number	02-4377
Deposit Account Name	Baker Botts L.L.P.

The Director is authorized to: (check all that apply)

- Charge fee(s) indicated below Credit any overpayments
 Charge any additional fee(s) or any underpayment of fee(s)
 Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.

FEE CALCULATION (continued)

ADDITIONAL FEES

- Surcharge - late oath or filing fee
 Non-English Specification
 Extension for reply within first month
 Extension for reply within second month
 Extension for reply within third month \$525
 Extension for reply within fourth month
 Extension for reply within fifth month
 Notice of Appeal
 Filing a brief in support of an appeal
 Petition to revive - unavoidable
 Petition to revive - unintentional
 Utility Issue Fee
 Design Issue Fee
 Publication Fee
 Petitions to the Commissioner
 Request for Continued Examination (RCE) \$405
 Information Disclosure Statement (IDS)

FEE CALCULATION

Extra Claim Fees

	Extra Claims	Fee	Fee Paid
Total Claims	<input type="text"/>	x 25 =	\$0
Independent Claims	<input type="text"/>	x 105 =	\$0
Multiple Dependent	<input type="text"/>	=	\$0
SUBTOTAL		\$0	

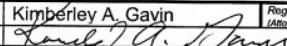
Fee Description	Large Entity	Small Entity
Claims in excess of 20	50	25
Independent claims in excess of 3	210	105
Multiple dependent claim, if not paid	370	185

Other fee -

SUBTOTAL (\$ 930)

SUBMITTED BY

(Complete if applicable)

Name (Print/Type)	Kimberley A. Gavin	Registration No. (Attorney/Agent)	51,723	Telephone	212-408-2500
Signature			Date	10/31/2007	

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.